

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <i>10787173</i>	FILING DATE	
						APPLICANT(S)	<i>2/18/07</i>	
CLAIMS						<i>2/18/07</i>		
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1							51	/
2							52	/
3							53	/
4							54	/
5							55	/
6							56	/
7							57	/
8							58	/
9							59	/
10							60	/
11							61	/
12							62	/
13							63	/
14							64	/
15							65	/
16							66	/
17							67	/
18							68	/
19							69	/
20							70	/
21							71	/
22							72	/
23							73	/
24							74	/
25							75	/
26							76	/
27							77	/
28							78	/
29							79	/
30							80	/
31							81	/
32							82	/
33							83	/
34							84	/
35	/						85	/
36		/					86	/
37		/					87	/
38		/					88	/
39		/					89	/
40		/					90	/
41		/					91	
42		/					92	
43	/						93	
44		/					94	
45		/					95	
46		/					96	
47		/					97	
48		/					98	
49		/					99	
50		/					100	
TOTAL IND.	6						TOTAL IND.	
TOTAL DEP.	50						TOTAL DEP.	
TOTAL CLAIMS	54						TOTAL CLAIMS	